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	,		This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any signature thereon.									
	i	☐ Correspondence Address Indication Form Attached.										
	:	Fees ar	e attached as	calculated bak	ow:				•		:	
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		Petition	If proper multiple dependent claims now added for first time, add \$300.00 (ignore improper) Petition is hereby made to extend the current due date so as to cover the filling date of this paper and attachment(s) (\$110.00/1 month; \$430.00/2 months; \$980.00/3 months)									
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			TOTAL TO BE CHARGED TO DEPOSIT ACCOUNT 14-1140 \$ 4 The Commissioner is hereby authorized to charge any <u>deficiency</u> , or credit any overpayment, in the fee(a) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by t firm) to our Account No. 14-1140. A <u>duplicate</u> copy of this sheet is attached.									
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